

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

ADDRESS (number and street)

651 SALLY PLACE

Check if different
than previously
reported. (ACC)

WAUCHULA

FL

33873

2. FEC IDENTIFICATION NUMBER ▼

C

C00574236

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

17

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Allen Ellison

Signature of Treasurer

Allen Ellison

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 15

Write or Type Committee Name

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Report Covering the Period:

From:

MM / DD / YYYY
03 / 01 / 2015

To:

MM / DD / YYYY
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	12525.90	12525.90
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	12525.90	12525.90
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7297.70	7297.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	60.84	60.84
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7236.86	7236.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10789.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5500.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 15

Write or Type Committee Name

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

6800.00

6800.00

(ii) Unitemized.....

5725.90

5725.90

(iii) TOTAL of contributions from individuals ▶

12525.90

12525.90

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

12525.90

12525.90

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

5500.00

5500.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

5500.00

5500.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

60.84

60.84

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

18086.74

18086.74

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7297.70	7297.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7297.70	7297.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18086.74
25. SUBTOTAL (add Line 23 and Line 24).....	18086.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7297.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10789.04

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Arthur Burnett

Mailing Address 6229 32nd Place NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2016

Transaction ID : SA11Al.4148

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Arthur Burnett

Mailing Address 6229 32nd Place NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : SA11Al.4163

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Florida Recovery Group LLC

Mailing Address 1300 NW 17th Ave

City

DelRay

State

FL

Zip Code

33445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 17 2016

Transaction ID : SA11Al.4166

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 15

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Jan Goodman

Mailing Address 1300 NW 17th Ave

City

Delray Beach

State

FL

Zip Code

33445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Recovery Group, LLC

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 17 / 2016

Transaction ID : SA11AI.4166.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Susana Gilmore

Mailing Address 831 E Kathy Court

City

Venice

State

FL

Zip Code

34293

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2016

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Betty Gissendanner

Mailing Address 23259 Painter avenue

City

Port Charlotte

State

FL

Zip Code

33954

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 11 / 2015

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Catherine Heller

Mailing Address 1713 Hwy 441 N

Suite E

City

Okeechobee

State

FL

Zip Code

34972

FEC ID number of contributing
federal political committee.

C

Name of Employer

Okeechobee Family Practice

Occupation

Office Assistant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2016

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carlene LouisJeune

Mailing Address 1224 David Court

City

Wauchula

State

FL

Zip Code

33873

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Home Care Aid

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2015

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Karissa Rivers

Mailing Address 5074 Walker Ave

City

Ona

State

FL

Zip Code

33865

FEC ID number of contributing
federal political committee.

C

Name of Employer

FI Department of Children

Occupation

Nurse

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Kirby Selton

Mailing Address 9474 Afton Grove

City

Cordova

State

TN

Zip Code

38018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Carpenter

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2016

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nancy ward

Mailing Address 3552 Cadbury Cir

City

Venice

State

FL

Zip Code

34298

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2016

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Women's Medical Services, LLC

Mailing Address 6510 Main Street
Suite 215

City

Miami Lakes

State

FL

Zip Code

33014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 21 / 2016

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. Ata Atogho

Mailing Address 6510 Main Street
Suite 215

City	State	Zip Code
Miami Lakes	FL	33014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Women's Medical Services, LLCOccupation
Managing Partner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2016

Transaction ID : SA11AI.4164.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Alan Zurak

Mailing Address 12A E Hardwood Ter

City	State	Zip Code
Palisades Park	NJ	07650

FEC ID number of contributing
federal political committee.

C

Name of Employer
A2Z PerformanceOccupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2016

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

6800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 15

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

Allen Ellison

Mailing Address 651 Sally Place

City

Wauchula

State

FL

Zip Code

33873

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ellison for Congress

Occupation
Candidate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

06 / **22** / **2016**

Transaction ID : SA13A.4170

Amount of Each Receipt this Period

5500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

5500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. M.A Aitcetson

Mailing Address 651 Sally Place

City	State	Zip Code
Wauchula	FL	33873

Purpose of Disbursement
Financial Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2015

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Transaction ID : SB17.4190

B. Dollar Rental

Full Name (Last, First, Middle Initial)

Mailing Address 5330 E 31st Street

City	State	Zip Code
Tulsa	OK	74135

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2016

Amount of Each Disbursement this Period

257.80

☐ Memo Item

Transaction ID : SB17.4183

c. Dollar Rental

Full Name (Last, First, Middle Initial)

Mailing Address 5330 E 31st Street

City	State	Zip Code
Tulsa	OK	74135

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

230.56

☐ Memo Item

Transaction ID : SB17.4185

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1188.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. Dollar Rental

Mailing Address 5330 E 31st Street

City	State	Zip Code
Tulsa	OK	74135

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

109.07

☐ Memo Item**Transaction ID : SB17.4186****B. Dollar Rental**

Mailing Address 5330 E 31st Street

City	State	Zip Code
Tulsa	OK	74135

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

125.80

☐ Memo Item**Transaction ID : SB17.4187****C. Dollar Rental**

Mailing Address 5330 E 31st Street

City	State	Zip Code
Tulsa	OK	74135

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2016

Amount of Each Disbursement this Period

212.87

☐ Memo Item**Transaction ID : SB17.4188****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

447.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. Dollar Rental

Mailing Address 5330 E 31st Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2016

City	State	Zip Code
Tulsa	OK	74135

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Expense

135.60

Candidate Name

Category/
Type☐ Memo Item**Transaction ID : SB17.4189**

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Vonne Hamilton

Mailing Address 6125 Praise Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2015

City	State	Zip Code
Sebring	FL	33876

Amount of Each Disbursement this Period

Purpose of Disbursement
Stipend

500.00

Candidate Name

Category/
Type☐ Memo Item**Transaction ID : SB17.4180**

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Vonne Hamilton

Mailing Address 6125 Praise Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2015

City	State	Zip Code
Sebring	FL	33876

Amount of Each Disbursement this Period

Purpose of Disbursement
Stipend

600.00

Candidate Name

Category/
Type☐ Memo Item**Transaction ID : SB17.4182**

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1235.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. RBGP, LLC

Mailing Address 1717 E Busch

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2015

City	State	Zip Code
Tampa	FL	33612

Amount of Each Disbursement this Period

Purpose of Disbursement
Printing Services

208.06

Candidate Name

Category/
Type☐ Memo Item**Transaction ID : SB17.4178**

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

208.06

3079.76

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 15 OF 15

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4170

ALLEN ELLISON FOR CONGRESS CAMPAIGN COMMITTEE**LOAN SOURCE** Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Allen Ellison

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
651 Sally Place

City

State

ZIP Code

Wauchula

FL

33873

Original Amount of Loan

5500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5500.00

TERMS

Date Incurred

M M / D D / Y Y
06 / 22 / 2016

Date Due

M M / D D / Y Y
12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5500.00

TOTALS This Period (last page in this line only)..... ►

5500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.